## **Building Permit Application**



105 Ballard Dr • P. O. Box 130 • Lindale, TX 75771 • 903.882.6861 (phone) • 903.881.8170 (fax) <u>www.lindaletx.gov</u>

Application Date:	Permit #:						
PROPERTY INFOR	MATION					(Offic	ce Use Only)
Street Address:		City/State:		Zip:	□Resid □ Indu		□Commercial □Other
PROPERTY OWNE	R INFORMA	TION			l		
First/Last Name: Business Name:						Phone Number:	
Street Address:			City:				Zip:
CONTRACTOR INF	FORMATION	J					
Business Name:				Phone Nu	mber:		
Supervisor or Contact Person:						Phone/Cell Number:	
Supervisor of Confact Person.				Thome, cer	r rumber.		
Street Address:			City:	Sta			Zip:
<ul><li>□ NEW CONSTRUCT</li><li>□ ACCESSORY BUIL</li><li>□ SWIMMING POOL</li></ul>			□ REM □ REP □ OTH	LACE ROOF	7		
			ilding Estimated Value:				
New Resident Residential R Commercial	rcial and Indu tial Construct emodel - \$25. Remodel - \$75	ion - \$.10 per 00 + \$5.00 per 5.00 + \$5.00 pe	sq. ft \$.15 per s sq. ft \$100.00 m • \$1,000 valuation er \$1,000 valuatio	ninimum (based on on n (based on	estimated jo a estimated j	ob cost) job cost)	& Regulation for an
Americans with Disabili number.  TAS #							
Protection Rules (TAHF)  Yes □No  If the answer is survey conducted in accordance.	PR) and the National Republic	tional Emission e owner/operato TAHPR and NE	Standards for Hazar of the renovation	urdous Air (N site, I unders	NESHAP). Ha	s this sur s my resp	onsibility to have this
I herby certify that I have been authorized by the In addition, if a permit for	at I am the owner he owner to make	of record of the nation a	s his authorized agent	and I agree to	conform to all	applicable	
shall have the authority to permit.							
Signature of Applicant			Printed Name				Phone Number
Responsible person in charge of	of work		Title				Phone Number